Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

, ,,													
		CLAIMS AS	FILED - (Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			20				Γ	RATE	FEE] [RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			7 9 minus 20 =		* 6		Ī	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			2_minus 3 =		*			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM P			RESENT				ţ	+140=		OR	+280=		
* If	the difference	in column 1 is	less than ze	ero, enter	r "0" in c	olumn 2	L	TOTAL		OR	TOTAL	1(1)	
	С	LAIMS AS A	MENDED - PART II (Column 2) (Column 3)					SMALL ENTITY			OTHER THAN R SMALL ENTITY		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	T 01 111	=		X42=		OR	X84=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL						Ţ	+140=		OR	+280=		
								TOTAL DDIT. FEE			TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDW	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	*	
AME	Independent	*	Minus	***	T CL AIL	=		X42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=		
19							L	TOTAL DDIT. FEE			TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)											,		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	** .		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=		OR	X84=		
	FIRST PRESE	ULTIPLE DE	PENDEN	T CLAIM		-			1	ļ			
*	If the entry in colu	ımn 1 is less than t	he entry in col	umn 2. writ	e "0" in co	olumn 3.	L	+140=		OR	+280=	·	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE													
		mber Previously Pa					r fou	nd in the ap	propriate bo	x in co	lumn 1.		